



WITHDRAWAL OF CLAIM

Debtor Name and Case Number	Rochester Drug Cooperative, Inc.; Case No.: 20-20230
Creditor Name and Address:	City of Philadelphia Law Department Tax & Revenue Unit Bankruptcy Group, MSB 1401 John F. Kennedy Blvd., 5th Floor Philadelphia, PA 19102-1595
Court Claim Number (if known):	22650
Date Claim Filed:	09/07/2020
Total Amount of Claim Filed:	Undetermined

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or the duly appointed Claims Agent, to reflect this withdrawal on the official claims register for the above-referenced Debtor.

Dated: 5/25/22

A handwritten signature in black ink, appearing to read 'Pamela Elchert Thurmond'.

Print Name: Pamela Elchert Thurmond

Title (if applicable) Senior Attorney